



FAX TRANSMITTAL SHEET

Motorola, Inc.  
Intellectual Property Section  
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Schaumburg, IL 60196

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☐ Number of Pages (Including this page)

Date: September 27, 2004

To: Examiner Burd, Kevin Michael – Group 2631

Location: United States Patent and Trademark Office

Fax No.: 703-872-9306

From: Jeffrey K. Jacobs (Registration No. 44,798)

Subject: Serial No. 09/804,602 –Prsby et al.

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MESSAGE:

Enclosed herewith, please find a RESPONSE Office Action for filing in the below-identified application.

**PLEASE GIVE THESE PAPERS TO:**

EXAMINER:	Burd, Kevin Michael
GROUP ART UNIT:	2631
SERIAL NO.:	09/804,602
FILED:	March 12, 2001
INVENTOR:	Prsby et al.
ATTORNEY DOCKET NO.:	CE08684R

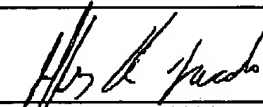
PTO/SB/21 (08-00)

<b>TRANSMITTAL FORM</b> <small>(to be used for all correspondence after initial filing)</small>	Application Number	09/804,602	
	Filing Date	March 12, 2001	
	First Named Inventor	Prsby et al.	
	Group Art Unit	2631	
	Examiner Name	Burd, Kevin Michael	
Total Number of Pages in this Submission	4	Attorney Docket Number	CE08684R


  

ENCLOSURES			(check all that apply)
<input checked="" type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input checked="" type="checkbox"/> Amendment/Reply  <input type="checkbox"/> After Final  <input type="checkbox"/> Affidavits/Declaration(s)  <input type="checkbox"/> Extension of time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Documents  <input type="checkbox"/> Response to Missing Parts/ Incomplete Application  <input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application)  <input type="checkbox"/> Drawing(s)  <input type="checkbox"/> Licensing-Related papers  <input type="checkbox"/> Petition  <input type="checkbox"/> Petition to Convert to a Provisional Application  <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CDs	<input type="checkbox"/> After Allowance Communication to Group  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter with appropriate copies  <input type="checkbox"/> Other Enclosure(s) (please identify below)	<input type="checkbox"/> Response to Restriction Requirement <input type="checkbox"/> Associate Power of Attorney <input type="checkbox"/> RCE <input type="checkbox"/> Copy of Notice to File Missing Parts <input type="checkbox"/> Transmittal of Formal Drawings <input type="checkbox"/> Response to Notice of Non- Recordation of Document
Remarks			

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm or Individual	Jeffrey K. Jacobs	Registration No.	44,798
Signature			
Date	September 27, 2004		

CERTIFICATE OF TRANSMISSION			
I hereby certify that this correspondence is being facsimile transmitted to the USPTO to facsimile number _____ or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 on the date listed below:			
Typed or printed name	Nanette Orr		
Signature			Date
			September 27, 2004

<b>FEE TRANSMITTAL</b>  Patent fees are subject to annual revision		<i>Complete if Known</i>	
		Application Number	09/804,602
		Filing Date	March 12, 2001
		First Named Inventor	Prsby et al.
		Examiner Name	Burd, Kevin Michael
TOTAL AMOUNT OF PAYMENT (\$)		Group Art Unit	2631
		Attorney Docket No.	CE08684R

<b>METHOD OF PAYMENT</b>  1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to: Deposit Account Number <u>50-2117</u> Deposit Account Name <u>Motorola, Inc.</u>  <input checked="" type="checkbox"/> Charge Any Additional Fee required under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27  2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other	<b>FEE CALCULATION (continued)</b>  <b>3. ADDITIONAL FEES</b> <table style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late Provisional filing</td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td></tr> <tr><td>1812</td><td>2520</td><td>1812</td><td>2520</td><td>For filing a request for ex parte Reexamination</td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIF prior to Examiner action</td></tr> <tr><td>1805</td><td>1840*</td><td>1805</td><td>1840*</td><td>Requesting publication of SIF after Examiner action</td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td></tr> <tr><td>1252</td><td>410</td><td>2252</td><td>205</td><td>Extension for reply within second month</td></tr> <tr><td>1253</td><td>930</td><td>2253</td><td>465</td><td>Extension for reply within third month</td></tr> <tr><td>1254</td><td>1450</td><td>2254</td><td>725</td><td>Extension for reply within fourth month</td></tr> <tr><td>1255</td><td>1970</td><td>2255</td><td>985</td><td>Extension for reply within fifth month</td></tr> <tr><td>1401</td><td>320</td><td>2401</td><td>160</td><td>Notice of Appeal</td></tr> <tr><td>1402</td><td>320</td><td>2402</td><td>160</td><td>Filing a brief in support of an appeal</td></tr> <tr><td>1403</td><td>280</td><td>2403</td><td>140</td><td>Request for oral hearing</td></tr> <tr><td>1451</td><td>1510</td><td>1451</td><td>1510</td><td>Petition to institute a public use proceeding</td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - 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<b>SUBMITTED BY</b>		<i>Complete (if applicable)</i>	
Name (Print/Type)	Jeffrey K. Jacobs	Registration No.	44,798
Signature	<i>Jeffrey K. Jacobs</i>	Telephone	847/576-5562
		Date	September 27, 2004